

UTILITY PATENT APPLICATION TRANSMITTAL <small>(only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. END-5005NP	
		First Inventor Robert J. Dunki-Jacobs et al.	
		Title METHODS AND DEVICES FOR DETECTING ABNORMAL TISSUE CELLS	
		Express Mail Label No. ER 554 942 624 US	

APPLICATION ELEMENTS See MPEP Chapter 600 concerning utility patent application contents.	ADDRESSED TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(submit an original and a duplicate for fee processing)</small> 2. <input type="checkbox"/> Applicant claims small entity status. 3. <input checked="" type="checkbox"/> Specification [Total Pages41] <small>(Preferred arrangement set forth below)</small> - Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 13] 5. Oath or Declaration [Total Pages 3] a. <input checked="" type="checkbox"/> Not executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small> 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement <small>(IDS)/PTO-1449</small> <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Request and Certifications under 35 U.S.C. 122 <small>(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</small> 17. <input type="checkbox"/> Other
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18. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: _____, filed _____ Prior application information: Examiner _____ Group Art Unit: _____ For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.	
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19. CORRESPONDENCE ADDRESS	
<input checked="" type="checkbox"/> Customer Number or Bar Code Label 000027777 or <input type="checkbox"/> Correspondence Address below	
Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA	

20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to Gerry S. Gressel at: <div style="text-align: right;">Telephone: (513) 337-3295 Fax: (513) 337-8489</div>	
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21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
NAME	Gerry S. Gressel
SIGNATURE	11/14/03
DATE	November 14, 2003

16085 U.S. PTO
111303

FEE TRANSMITTAL

Complete if Known

Application Number	
Filing Date	November 14, 2003
First Named Inventor	Robert J. Dunki-Jacobs et al.
Group Art Unit	Not assigned
Examiner Name	Not assigned
Attorney Docket Number	END 5005NP

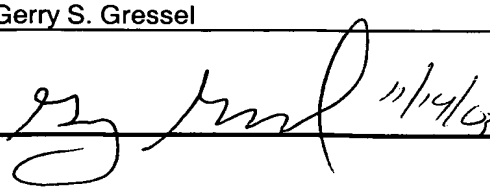
FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
TOTAL CLAIMS	3 - 20 =	0	x 18.00	\$ 0.00
INDEPENDENT CLAIMS	3 - 3 =	3	x 86.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$280.00	
			TOTAL FEES	\$ 770.00

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- ☒ Please charge Deposit Account No. 10-0750/END 5005NP/GSG in the amount of \$770.00.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/ END 5005NP/GSG.

SUBMITTED BY:		Complete (if applicable)
Typed or Printed Name	Gerry S. Gressel	Reg. No. 34,342
Signature	 Date: November 14, 2003	Deposit Account No. 10-0750